

**State of Delaware**  
**Group Health Insurance Program**  
**New Dental Plan Rates Effective July 1, 2010**

	<b>Total Monthly Rate</b>	<b>State Pays</b>	<b>Employee/ Pensioner Contributions</b>
<b>Dominion Dental HMO</b> <i>Administered by Dominion Dental</i>			
Employee	\$21.28	\$0.00	\$21.28
Employee & Spouse	\$35.64	\$0.00	\$35.64
Employee & Child(ren)	\$43.16	\$0.00	\$43.16
Family	\$50.68	\$0.00	\$50.68
<b>Delta Dental PPO plus Premier</b> <i>Administered by Delta Dental</i>			
Employee	\$25.10	\$0.00	\$25.10
Employee & Spouse	\$51.22	\$0.00	\$51.22
Employee & Child(ren)	\$50.28	\$0.00	\$50.28
Family	\$83.90	\$0.00	\$83.90